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		Attorney Docket Number	03-0042	OMB CONTROL NUMBER.				
DECLARATION FOR U' DESIGN	IILIIY OR	First Named Inventor	Hui Liang Yuan, e	t al.				
PATENT APPLICATION		COL	MPLETE IF KNOWN					
(37 CFR 1.63)) 7	Application Number	T					
Declaration De	eclaration	Filing Date						
Submitted OR Submitted	ubmitted after Initial ling (surcharge	Art Unit						
Filing (3	7 ČÉD 4 46 (A))	Examiner Name						
I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled: FLUOROELASTOMER GASKET COMPOSITIONS								
(Title of the Invention) the specification of which is attached hereto								
OR was filed on (MM/DD/YYYY)	,	as United States Ap	plication Number or F	PCT International				
Application Number	and was amended	on (MM/DD/YYYY)		(if applicable).				
I hereby state that I have reviewed and u	l understand the contents o	· · · · · · · · · · · · · · · · · · ·	pecification, including	J				
amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application Number(s) Count	Foreign Filing ry (MM/DD/YY)		ity Certified Imed Yes	Copy Attached? No				
Additional foreign application number								

[Page 1 of 2]

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If you need assistance in completing the form, cell 1-800-PTO-9199 and select nation 2

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	X Custome	er Number:	29	9293		OR		Corresp	ondence address below
Name Freudenberg-NOK General Partnership									
Address Intellectual Property Department 47690 East Anchor Court									
City				State					ZIP
Plymouth					MI				48170-2455
Country		Telephone				Fax			
United States of		(734) 45					•) 451-	
I hereby declare that all statem and belief are believed to be statements and the like so made false statements may jeopardize	e true; and fur de are punishal	ther that thesole by fine or	se stat imprisc	ements onment	s were	e made oth, und	with	the kno	wledge that willful false
NAME OF SOLE OR FIRST IN	VENTOR:		7 A p	etition	has be	een filed	for thi	s unsian	ed inventor
Given Name		, A.,		***************************************	[1	Family N	lame		
(first and middle [if any]) Hui	Liang					or Surna	ame v	Yuan	
Inventor's	\sim \sim \sim				\-				Date
Signature	Dhy.	an							2/17/04
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Mailing Address									
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City	State				ZIP				Country
LaGrange		GA				302	40		U.S.A.
NAME OF SECOND INVENTO	R:			$ \Box$	Ар	etition h	as bee	n filed fo	or this unsigned inventor
Given Name			•	<u> </u>		amily Na			
(first and middle [if any]) Yingjie or Surname Kong									
Inventor's Signature	Kong								Date 2/18/04
Residence: City	State			Coun	try			Citizen	ıship
Canton	М	ichigan			U.	S.A.		Ped	ple's Rebulic of China
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Canton		Michigan				48188			U.S.A.
Additional inventors or a legal re	presentative are bei	ng named on the	s	uppleme	ental she	eet(s) PTC)/SB/02A	or 02LR a	attached hereto.

PTO/SB/02A (08-03)

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ADDITIONAL INVENTOR(S)

DECLARATION	Supplemental Sheet Page -3 of -3						
Name of Additional Joint Inventor, if any:		A peti	ition h	nas been filed for this	unsigned in	ventor	
Given Name (first and middle (if any)		A petition has been filed for this unsigned inventor Family Name or Surname					
Francis Joseph	Walker	10 01 0	<u>samamo</u>				
Inventor's June Maller	_				Date 2/	118/04	
Residence: City Tecumseh	State	/II Country U.S.A.			Citizenship U.S.A.		
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Mailing Address							
City Tecumseh	State	MI		_{Zip} 49286	Country	U.S.A.	
Name of Additional Joint Inventor, if any:		☐ A peti	ition h	nas been filed for this	unsigned inv	ventor	
Given Name (first and middle (if any)		Family Name or Surname					
Inventor's Signature		Date					
Residence: City	State	Country			Citizenship		
Mailing Address							
Mailing Address							
City	State			Zip	Country		
Name of Additional Joint Inventor, if any:		A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any)	Family Name or Surname						
				-			
Inventor's Signature		Date					
Residence: City	e Country Citizenship						
Mailing Address							
Mailing Address					 		
City	State			Zip.	Country		

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Attorney Docket No. 03-0042

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STATEMENT UNDER 37 CFR 3.73(b)					
Applicant/Patent Owner: Hui Liang Yuan, Yingjie Kong, Francis Joseph Walker					
Application No./Patent No.: Not yet assigned	Filed/Issue Date: Herewith				
Entitled: FLUOROELASTOMER GASKET COM	POSITIONS				
Freudenberg-NOK General Partnership	a general partnership				
(Name of Assignee)	(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)				
states that it is:					
1. 🗷 the assignee of the entire right, title, a	nd interest; or				
2. an assignee of less than the entire rig The extent (by, percentage) of its own	ht, title and interest. ership interest is%				
in the patent application/patent identified abo	ove by virtue of either:				
	the patent application/patent identified above. The assignment tent and Trademark Office at Reel, Frame, or for				
OR					
B. [] A chain of title from the inventor(s), of assignee as shown below:	f the patent application/patent identified above, to the current				
1. From:	To:				
	the United States Patent and Trademark Office at, or for which a copy thereof is attached.				
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	the United States Patent and Trademark Office at, or for which a copy thereof is attached.				
[] Additional documents in the cha	in of title are listed on a supplemental sheet.				
	I assignment document or a true copy of the original document) n in accordance with 37 CFR Part 3, if the assignment is to be				
The undersigned (whose title is supplied belo	w) is authorized to act on behalf of the assignee.				
February <u>19</u> , 2004	Theodore G. Duclos				
Date	Typed or printed name				
	Sheodore Duchos				
	Signature Chief Technology Officer				
	Title				

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Application Number	Not yet assigned
Filing Date	Herewith
First Named Inventor	H. Yuan, et al.
Title FLUORO	ELASTOMER GASKET COMPOSITIONS
Art Unit	Not yet assigned
Examiner Name	Not yet assigned
Attorney Docket Number	03-0042

I hereb	y appoint:							
	Practitioners at Customer Number	er. 292	293					
0	K							
	Practitioner(s) named below:							
	Nar	ne		Registration	n Number			
 								
								
								
as myle	our attorney(s) or agent(s) to pro	secute the application identifi	ad above, and to trans	act all busines	s in the United States Da	topt and		
Tradem	nark Office connected therewith.	secure the application identilis	ed above, and to trans	act all busines	s in the Onled States Fa	tent and		
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	Address			•				
-	City		State		Zip			
	Country							
	Telephone		Fax					
l _{am} th	ne:	<u> </u>	•					
Applicant/Inventor.								
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assignee of Record								
Name Dr. Theodore G. Duclos								
Signature Dulos								
Date	February <u>19</u> , 2004			Telephone	734-354-5476			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.								
*Total of forms are submitted.								

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